

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF ALABAMA

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Phillippi S Lowe

Plaintiff(s)/Petitioner(s)

vs.

CIVIL ACTION NO. 2:07CV29-WKW

(To be supplied by Clerk of Court)

Montgomery City of Alabama

Defendant(s)/Respondent(s)

MOTION TO PROCEED WITHOUT PREPAYMENT OF FEES

I, Phillippi S Lowe, a United States citizen, make this Motion to Proceed Without Prepayment of Fees pursuant to Title 28 U.S.C. § 1915 in order to proceed in forma pauperis in this action. I am unable to make prepayment of fees or to give security therefor, and it is my belief that I am entitled to redress. I have not divested myself of any property, monies or any items of value for the purpose of avoiding payment of said fees.

I. **BRIEF STATEMENT AS TO THE NATURE OF THE ACTION:** Criminal Tort, Federal Statute violation across State lines terror to commit premeditated murder of Plaintiff by Fraternal order of Police under color of law still continue.

II. **RESIDENCE:** Illegally made homeless
Your address: P.O. Box 368

Evergreen (City) Al (State) 36401 (Zip Code)

III. **MARITAL STATUS:** 1

1. Single Married Separated Divorced ✓
2. If married, spouse's full name:

IV. **DEPENDENTS:**

1. Number: 0
2. Relationship to dependent(s):
3. How much money do you contribute toward your dependents' support on a monthly basis? \$

Revised 4/10/06

Homeless Disable Veteran illegally made

V. EMPLOYMENT:

1. Name of employer: N/A
- a. Address of employer: _____
(Street)

(City) (State) (Zip Code)
- b. How long have you been employed by present employer?
Years: _____ Months: _____
- c. Income: Monthly \$ _____ or Weekly \$ _____
- d. What is your job title? _____
2. If unemployed, date of last employment: _____
Amount of salary and wages received per month in last employment: \$ _____
3. Is spouse employed? _____ If so, name of employer: _____

a. Income: Monthly \$ _____ or Weekly \$ _____
b. What is spouse's job title? _____
4. Are you and/or your spouse receiving welfare aid? _____
If so, amount: Monthly \$ _____ or Weekly \$ _____

VI. FINANCIAL STATUS

1. Owner of real property (excluding ordinary household furnishings and clothing):
- a. Description: N/A
- b. Full Address: _____
- c. In whose name: _____
- d. Estimated value - - - - - \$ _____
- e. Total amount owed - - - - - \$ _____
Owed to: _____ \$ _____
_____ \$ _____
- f. Annual income from property - - - - - \$ _____
2. Other assets/property, such as automobiles, boats, motor homes, court judgments, etc. (If more than two, list information on back):
- a.
- | | <u>Asset (1)</u> | <u>Asset (2)</u> |
|---------------------------|------------------|------------------|
| Make & Model: | <u>N/A</u> | _____ |
| In whose name registered? | _____ | _____ |
| Present Value of Asset: | _____ | _____ |
| Amount owed: | _____ | _____ |
| Owed to: | _____ | _____ |
- b. Total cash in banks, savings and loan associations, prisoner accounts,

financial institutions, other repositories, or anywhere else - \$ _____

- c. List monies received by you during the last twelve (12) months, or held for you by banks, savings and loan associations, prisoner accounts, other financial institutions, or other sources as indicated below:

Business, profession or other forms of self-employment - \$ _____
 Rent payments, interest or dividends - \$ _____
 Pensions, annuities or life insurance payments - \$ _____
 Gifts or inheritances - \$ _____
 Stocks, bonds or notes - \$ _____
 Tax refunds, Veteran benefits or social security benefits \$ approx 900.00 disable Veteran
 Any other sources - \$ _____

3. Obligations:

- a. Monthly rental on house or apartment - \$ _____
 b. Monthly mortgage payments on house - \$ _____

4. Other information pertinent to your financial debts and obligations:

N/A

(Creditor)	(Total debt)	(Monthly payment)
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. If you have indicated that you have minimal or no assets or income, please explain how you provide for your basic living needs such as food, clothing and shelter. (e.g. food stamps, family assistance or charitable contributions.)


Other (Explain): _____

VII. ALL PLAINTIFFS/PETITIONERS MUST READ AND SIGN:

I UNDERSTAND that any false statement(s) of a material fact contained herein may serve as the basis of prosecution and conviction for perjury or making false statements. **FURTHER, I CERTIFY** that all questions contained herein have been answered and are true and correct to the best of my knowledge and belief.

1-8-07

DATE



SIGNATURE OF PLAINTIFF/PETITIONER

P.O. Box 368

ADDRESS

Evergreen AL 36401